



Briefing on the Long Term Plan for the NHS

Purpose:

The purpose of this briefing is to summarise the long term plan for the NHS and its implications for the RC (UK)'s future work. This briefing identifies parts of the long term plan which are relevant to the RC (UK)'s work and provides analysis and recommendations for each relevant section.

Background:

The long term plan was published on 7 January 2019. It is an ambitious plan which outlines how to overcome challenges in the NHS for the next 10 years, including staff shortages, workforce and growing demand for services. The plan is available to download at: www.longtermplan.nhs.uk. If you would like further information on the main commitments in the plan and the opportunities and challenges this presents for the health and care system, please see ['The NHS long-term plan explained'](#) from The King's Fund.

The plan is structured under seven key chapters. These are:

1. A new service model for the 21st century
2. More NHS action on prevention and health inequalities
3. Further progress on care quality and outcomes
4. NHS staff will get the backing they need
5. Digitally-enabled care will go mainstream across the NHS
6. Taxpayers' investment will be used to maximum effect.
7. Next steps

Key analysis and recommendations:

The following chapters have been identified as having the most relevance to the work of the RC (UK) and are outlined in more detail below, including recommendations and implications for our organisation.

Chapter 1: A new service model for the 21st century

Changes to **urgent and emergency care**: the NHS will reduce pressure on emergency hospital services (more care will be available in the community). Plans include expanding and reforming urgent and emergency care to ensure that patients get the care they need fast (**Same Day Emergency Care**) and relieving pressure on A&E departments.

We will monitor implications for urgent and emergency care, particularly for the working patterns of the RC (UK) audience and members of the RC (UK) working in this sector.

The plan also places emphasis on supporting people to age well. People will get more **control over their own health** and **more personalised care when they need it**. This includes support for training of specialist hospices for thorough **personalised care planning**.

The plan aims to give people 'more say about the care they receive and where they receive it, particularly towards the end of their lives'. The **emphasis on choice, control and**

personalised care provides a **valuable opportunity to promote the ReSPECT process** as contributing to a person-centred personalised care planning process, which enables patients to state their preferences to inform clinical judgements for a later time when they are unable to decide for themselves.

Care planning training might also be helpful for adopters of the ReSPECT Process.

There are also some aspects of the plan focusing on specific conditions which relate to ReSPECT, such as:

- **Dementia:** a more active focus on supporting people in the community, applying the NHS Comprehensive Model of Personalised Care.
- **Cancer:** By 2021, where appropriate, every person diagnosed with cancer will have access to **personalised care**, including needs assessment, **a care plan** and health and wellbeing information support.

Digital transformation plans:

Digitally enabled primary and outpatient care will go mainstream across the NHS

In addition, **changes to NHS digital technology**, such as access to the summary care record through the NHS app, **may help to support the digital integration of ReSPECT**.

The long term plan offers a **significant opportunity for ReSPECT due to its recognition of the importance of personalised care planning**. This may enable us to acquire greater recognition and support for ReSPECT at a national level. We can position ReSPECT as contributing towards this, therefore promoting its uptake with key decision makers and stakeholders at both national and local levels.

Chapter 3: Further progress on care quality and outcomes

The plan promises a strong start in life for children and young people. **We will monitor the implications of any changes to neonatal critical care or paediatric healthcare** which may impact, or be impacted by, **RC (UK) paediatric guidelines, standards and courses such as: NLS, ARNI, PILS and EPALS**, and advocate for how these core parts of the RC (UK)'s work **can contribute to improving care quality and outcomes for children and young people**.

This chapter also includes significant detail on cardiovascular disease (CVD) with the plan pledging better care for major health conditions, including **cardiovascular disease (CVD)**.

The plan describes CVD as **the single biggest area where the NHS can save lives over the next 10 years**. It focuses on prevention, early detection and treatment, such as cardiac rehabilitation.

The plan recognises that **fast and effective action will help save lives of people suffering a cardiac arrest**, as the chance of survival from a cardiac arrest that occurs out of hospital doubles if someone receives immediate resuscitation (**such as bystander CPR**) or a high energy electric shock to the heart (**defibrillation**).¹

The plan states that **a national network of community first responders and defibrillators will help to save up to 4,000 lives each year by 2028**. This will be supported by **educating**

¹ Perkins, G., Lockey, A., de Belder, M., Moore, F., Weissberg, P. & Gray, H. (2016) National initiatives to improve outcomes from out-of-hospital cardiac arrest in England. *Emergency Medical Journal*. 33 (7), 448-451. Available from: <http://dx.doi.org/10.1136/emered-2015-204847>

the public, including young people of school age, about how to recognise and respond to out-of-hospital cardiac arrest. The plan also includes pledges that NHS England will work with partners such as the British Heart Foundation to harness new technology and ensure the public and emergency services are able to locate this life-saving equipment in an emergency (through, for example, the forthcoming National Defibrillator Network). More effective mapping of incidence will help direct community initiatives to areas where they are most needed, with the British Heart Foundation's National Outcomes Registry allowing tracking of survival rates and targeting unwarranted variation.

A key milestone for the plan is a pledge **to improve community first response and build defibrillator networks to improve survival from out of hospital cardiac arrest.**

The plan also recognises **GoodSAM** as a case study and exemplar of best practice.

These plans will be implemented in conjunction with the Department for Education's announcement that **CPR training and defibrillator awareness will be on the secondary school curriculum in England from 2020**, through the new mandatory subject of **health education.**

We will maximise the opportunity to promote these areas of core interest to the RC (UK) at national level by seeking opportunities to offer our expertise to support implementation of these proposals. For example, we have already met with the Department for Education to discuss how we can support the delivery of **CPR education and defibrillator awareness** within health education.

We welcome the long term plan's extensive recognition of key issues for improving the treatment of cardiovascular disease. We look forward to working with the NHS to support their focus on the prevention of cardiovascular disease, specifically their ambition to improve outcomes after out-of-hospital cardiac arrest. This provides the RC (UK) with an opportunity to keep our key priorities on the national agenda: to garner national support for improvements to community first response, defibrillator networks to improve survival from out of hospital cardiac arrest, the utilisation of technology such as GoodSAM to save lives, and CPR education, not only in schools, but also for the wider community.

We can use this opportunity to connect with stakeholders and decision makers at NHS England and at a local level who are responsible for the delivery of this part of the plan, to ensure it is implemented and offer our expertise to support this.

Chapter 4: NHS staff will get the backing they need.

The plan pledges to increase the **NHS workforce**, training and recruiting more professionals.

The plan recognises that to make this Long Term Plan a reality, **the NHS will need more staff, working in rewarding jobs and a more supportive culture.**

Other wider reforms for the NHS workforce proposed by the plan will be finalised by NHS Improvement and the Department for Health and Social Care when the education and training budget for Health Education England (HEE) is set in 2019.

The plan states that the NHS Workforce implementation plan will be published "later this year" and will be overseen by a new cross sector national workforce group, to be established by NHS Improvement, HEE and NHS England.

We will monitor the implications of this part of the plan **for reforms to the NHS workforce**, particularly regarding **training**. We will contribute the RC (UK)'s view on the importance of issues such as time for training, and skill mix, to the national workforce group as they develop the interim workforce plan for the next 5 years. For example, we have submitted [our comments on supporting the clinical workforce](#) to the Department of Health and Social Care's workstream for the long term plan via the online community 'Talk Health and Care'. This builds upon our previous response to the Health Education England's consultation on their proposed workforce strategy.

We will emphasise the importance of staff development for retention and supporting the NHS workforce through funding and ring fenced time for continuing professional development, and **the role of RC (UK) quality standards and courses**.

Implications of the long term plan for RC (UK) strategy:

We will also **review the future direction of the RC (UK) Strategic Plan 'Resus 2020'** in light of the long term plan for the NHS. The long term plan is likely to have implications for many of the strategy's pillars going forward, particularly: how we support the changing health and care system, continue to prioritise saving lives in the community, as well as in hospital and other care settings, influence policy and practice by positioning ourselves as thought leaders in emergency care, and promoting person-centred care planning through the ReSPECT process.

Summary of analysis and recommendations:

The plan has been broadly well-received for its ambition, however commentaries have highlighted challenges for ascertaining the likely success of the delivery of the long term plan, until we know about additional decisions such as: the long-awaited publication of the social care green paper (due by April) which will set out plans for a sustainable way to fund this sector, public health funding, especially in local government, reforms to the NHS workforce once the Health Education England (HEE) education and training budget is set later this year, capital investment and how workforce pressures and staff shortages will be addressed, especially given the impact of Brexit on recruitment and retention.

The next steps for the NHS will involve plans for local implementation at integrated care system (ICS) level.

Summary of recommendations for the RC (UK):

We look forward to working with the NHS to support their focus on preventing cardiovascular disease, and their ambition to improve outcomes after out-of-hospital cardiac arrest, to utilise technology such as GoodSAM to save lives and to support the NHS workforce through funding for CPD.

Specifically:

- We will monitor implications for **urgent and emergency care**, particularly for the working patterns of the RC (UK) audience and members of the RC (UK) working in this sector.
- The emphasis on **personalised care planning** (particularly for dementia and cancer patients) and also on **digital transformation** provide **a valuable opportunity to promote the ReSPECT Process** both nationally with NHS England, and at a local level with ICS's as the plan is implemented, to demonstrate how ReSPECT can contribute to these aims of the long term plan.

- We will advocate for **how RC (UK) paediatric guidelines, standards and courses can contribute to improving care quality and outcomes for children and young people.**
- A key opportunity for the RC (UK) is the emphasis in the plan on **cardiovascular disease**, including **out-of-hospital cardiac arrest, bystander CPR and CPR education** both in schools and the wider community, **defibrillator networks and recognition of GoodSAM**. We will maximise the opportunity to promote these areas of core interest to the RC (UK) at national level by seeking opportunities to offer our expertise to support implementation of these proposals. For example, we have already met with the Department for Education to discuss how we can support the delivery of **CPR education and defibrillator awareness** in English secondary schools from 2020 within the new mandatory subject of health education.
- We will also monitor **reforms to the NHS workforce** and consider the impact of these on training for NHS staff and for RC (UK) courses in particular. We will seize opportunities to promote the importance of staff development and time for training.
- We will also **review the future direction of the RC (UK) Strategic Plan 'Resus 2020'** in light of the long term plan for the NHS. The long term plan is likely to have implications for many of the strategy's pillars going forward.